

Students with Fetal Alcohol Syndrome Participating in Recess

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Abstract

For the student with Fetal Alcohol Syndrome (FAS), participation in recess can often be both challenging and rewarding for the student and teacher. This paper will address common characteristics of students with FAS and present basic solutions to improve the experience of these students in the recess setting. Initially, the definition and prevalence of FAS will be presented. This will be followed by a discussion of the benefits of the recess setting for the student. Next, as a lead-up to the specific topic of recess for students with FAS, a discussion of possible modifications and teaching strategies for working with children with FAS in the classroom will be noted. The paper will then address the possible challenges and subsequent modifications and teaching strategies for working with children with FAS in recess. Lastly, specific methods of proactively including a student with FAS in a recess activity will be discussed.

Definition and Prevalence of Fetal Alcohol Syndrome

FAS occurs when a woman consumes alcohol while pregnant. Various birth defects can result during each stage of the infant's development that will cause them to suffer from FAS. The broad term for all children affected by alcohol prenatally is Fetal Alcohol Spectrum Disorder. In 2009, sociologists at the University of New Mexico estimated the prevalence of Fetal Alcohol Spectrum Disorders to be between 2 – 5% of the U.S. population (May, Gossage, Kalberg, Robinson, Buckley, Manning & Hoyme, 2009). May et al say that somewhere between two and seven children per 1,000 suffer from the most severe and well-known form known as FAS (2009). Ann Streissguth, Ph.D. states that FAS is, in fact, a birth defect, which manifests itself in both mild and severe conditions primarily affecting the brain (1997). There is a wide spectrum of severity, and the symptoms vary for each individual, creating "his or her own special needs, problems, and capabilities" (Streissguth, 1997). The effects of the disease become more apparent as the child grows and enters school. These children suffer from delayed development, hyperactivity, poor gross and fine motor skills, attention deficits, and difficulty understanding and following through on directions (Streissguth, 1997). In school,

Streissguth (1997) explains, these children are most often seen as unpredictable and disruptive and exhibit behaviors that are difficult to interpret.

Possible Modifications/Teaching Strategies for Working with an Individual with a Fetal Alcohol Syndrome in the Classroom

Children with FAS often struggle in school due primarily to the overwhelming amount of action and social interaction required on a regular basis. In order to reduce stress for the student and the teacher, it is important to maintain structure and routine. Maureen Murphy, a teacher with much experience working with children with FAS, says she has two basic structural forms: 1) offering clear options, and 2) maintaining a consistent schedule (Kleinfeld, & Wescott, 1993). Another teacher suggests that the teacher and child have a consistent signal that they are both familiar with so that the teacher can tell the child to stop a behavior (Soby, 1994). Children with FAS need to have positive reinforcement and encouragement for a job well done. Streissguth (1997) suggests that teachers be aware of the potential for repeated failure so as to avoid it altogether. These children need something to feel good about, she explains. Ultimately, Streissguth (1997) suggests consistent rules and a regular schedule, simple instructions, repetition, and helping the student set realistic goals.

Benefits of the Recess Setting for Children

Research through the years has clearly recognized the numerous values of recess during the school day. Recess serves as an optimal learning ground for children to grow both physically and socially. Dr. Jambor of the University of Alabama explains that recess has played a key role in developing such skills since 1901 as it “encouraged games of competition, allowed experimentation with new social strategies, and provided a setting for dramatic play” (Pytel, 2009). Kids learn numerous essential social skills while engaging in free physical activity. Such skills include”

- Conflict resolution
- Cooperation,
- Respect for rules
- Taking turns
- Sharing
- Using language to communicate
- Problem solving in situations that are real (Pytel, 2009).

Possible Challenges & Modifications for Children with a Fetal Alcohol Syndrome in the Recess Setting

Parents of children with FAS often explain their child’s struggles, “Each day starts anew without the advantages of what was learned the day before” (Streissguth, 1997). In light of the learning that takes place in the recess setting regarding social interactions, it is understandable that children with FAS would have a difficult time with recess. Children with FAS syndrome often have difficulty managing their emotions and therefore need the

support and guidance of a teacher. Spontaneity can often be overwhelming for these children as they have difficulty adjusting to rapid change (Kleinfeld, & Wescott, 1993). Considering the recess atmosphere, full of action and interaction, these children can quickly become overwhelmed. Modifications can go a long way in reducing teacher stress while also enhancing the experience of a child with FAS.

Table 1: Possible Modifications and Teaching Strategies for Children with Fetal Alcohol Syndrome in Recess

Possible Modifications	Reasoning
Offer gentle guidance	<ul style="list-style-type: none"> Children with FAS need to know what is expected of them. With this understanding, children can begin to make decisions in regard to their behavior (Streissguth, 1997).
Provide realistic goals, structure, and supervision	<ul style="list-style-type: none"> Activity suggestions are an ideal way to encourage a child with FAS to participate in recess. When this is followed by constructive feedback from a teacher who is aware of the child's behavior and interactions, the child learns self-confidence and regulation (Streissguth, 1997).
Present choices with clear options	<ul style="list-style-type: none"> Choices allow the child to evaluate their options in a more concise way without extra information to compound their processing (Kleinfeld, & Wescott, 1993).
Provide hands on materials for play	<ul style="list-style-type: none"> Concrete objects help the child to feel purpose and goal in participation. Children with FAS will benefit from being able to engage in a specific activity as they navigate their ever-changing interactions (Soby, 1994).
Modeling and hands on demonstration	<ul style="list-style-type: none"> Children with FAS benefit from visual examples and representations. For example, when the teacher models positive interaction with other students while demonstrating how to play Four Square, the child recognizes the teacher's behavior and will seek to replicate it in their participation (Soby, 1994).
Reduce instructions	<ul style="list-style-type: none"> Reducing the amount of verbal instruction and increasing physical gestures helps children with FAS to process and visualize (Soby, 1994).
Give feedback	<ul style="list-style-type: none"> Maintaining conversational exchanges with the child will help the teacher remain aware of how the child is handling the situation and gives the child a guide for their behavior (Soby, 1994).

Suggested Activities/Modifications for Including a Student with Fetal Alcohol Syndrome in Recess Activity

- Shooting basketball shots – avoid competitive full-court games where the child is forced to move at a high intensity level and play offense and defense so that advance skills, such as switching from offense to defense, can be avoided
- Passing a soccer ball with a partner – as with basketball, avoid competitive full-court games where the child is forced to move at a high intensity level and play offense and defense so that advance skills, such as switching from offense to

- defense, can be avoided
- Throwing and catching a ball or Frisbee with a partner or in a group would be a good choice as it develops social interaction while allowing the student to maintain a focus - the teacher, or other student, should demonstrate the activity to avoid confusion - remember, demonstrations are often better understood than verbal explanations
 - Playing a bowling-like game - as with other mentioned activities, this avoids competitive full-court games where the child is forced to move at a high intensity level - the game should be set-up to allow for immediate success.

Conclusion

Children with FAS struggle with the fast pace of life and processing changes and behaviors. Social interactions, which are enhanced in the recess setting, are easily complicated by misinterpretation and inappropriate responses. FAS affects a child's ability to interpret circumstances and emotions so these children need positive, clear, and consistent guidance from their teacher. Simply redirecting the child's focus or intervening before the child loses control can avoid many issues common in recess. Like other children, children with FAS deserve a safe and encouraging recess environment for growth.

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NOTE: "World History Brain Efficient Word Lists for Word Sorts, Puzzles, and More" to be published in the June Practical Teacher. Currently a free download copy of the book "World History Word Sorts" is available at the author's website, www.StrugglingReaders.com